

Wattle Hollow Retreat Center

Retreat Registration Form



To register now, you can either print this out and return it by mail (address below),
or copy it and send it via e-mail , with a separately mailed deposit.

Retreat you are interested in: _____

Dates: _____

Name: _____

E-mail: _____ Telephone: _____

Experience with meditation (if applicable to this retreat):

Special health concerns: (Meals will be vegetarian, with a ovo/dairy option alongside):

Please return this form, along with half of the fee as your deposit - checks made out to
JOY FOX and mail to:

Wattle Hollow, c/o Joy Fox
344 Combs Ave.
Fayetteville, AR 72701

This will secure your place in the retreat, and you will receive an orientation letter (what
to bring, directions, schedule) shortly afterwards.

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Questions? Call Joy at 479-225-2381